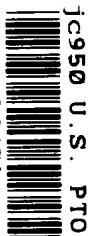


11/06/01



jc950 U.S. PTO

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PTO/58/05 (12-97)

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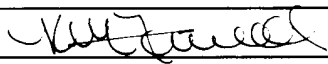
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jc972 U.S. PTO
09/993322

10/90/11

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	JL-2010	Total Pages	68
	First Named Inventor or Application Identifier			
	Derry Roopenian			
	Express Mail Label No.	EL848696180US		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231		
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>68</u>] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive title of invention. - Cross References to Related Applications. - Statement Regarding Fed sponsored R & D. - Reference to Microfiche Appendix. - Background of the Invention. - Brief Summary of the Invention. - Brief Description of the Drawings <i>(if filed)</i>. - Detailed Description. - Claim(s). - Abstract of the Disclosure. <p>3. <input checked="" type="checkbox"/> Drawing(s) <i>(35 USC 113)</i> [Total Sheets <u>8</u>]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>2</u>]</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.53(d)) c. <input checked="" type="checkbox"/> Unexecuted <i>(for continuation/divisional with Box 17 completed)</i> <p style="margin-left: 40px;"><i>[Note Box 5 below]</i></p> <p style="margin-left: 40px;">1. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> </div> <div style="width: 50%;"> <p>6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i></p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(If applicable, all necessary)</i></p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies <p>ACCOMPANYING APPLICATION PARTS</p> <p>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application. Status still proper and desired.</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input checked="" type="checkbox"/> Other: <u>Application Data Sheet</u></p> </div> </div>				
17. If a CONTINUING APPLICATION, check appropriate box and supply the required information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____				

18. CORRESPONDENCE ADDRESS					
NAME	Kevin M. Farrell, P.C.				
ADDRESS	P.O. Box 999				
CITY	York Harbor	STATE	Maine	ZIP CODE	03911
COUNTRY	USA	TELEPHONE	(207) 363-0558	FAX	(207) 363-0528
19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
NAME	Kevin M. Farrell				
SIGNATURE					
DATE	11/6/01				

U.S. ARC 2010 NEW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Derry Roopenian

Prior Application No.: 60/266,649

Prior Filing Date: February 6, 2001

Title: FcRn-BASED THERAPEUTICS FOR THE TREATMENT OF AUTO-
IMMUNE DISORDERS

FEE TRANSMITTAL FORM

BOX PATENT APPLICATION

Assistant Commissioner for

Patents

Washington, DC 20231

Dear Sir:

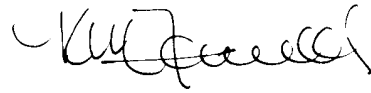
The filing fee for the referenced application has been
calculated as shown below.

CLAIMS	FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATION
	TOTAL CLAIMS	80-20 =	60	X 18	1,080
	INDEPENDENT	31-3=	28	x 84	2,352
	MULTIPLE DEPENDENT CLAIMS			280	
				BASIC FEE	740
				SUBTOTAL	4,172
	Reduction by 50% for filing by small entity				
	TOTAL =				2,086

____ Please charge my Deposit Account No. 06-0130 in the
amount of \$_____. Two copies of this
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____ A check in the amount of \$____. to cover the filing
fee is enclosed. Any deficiency or overpayment should
be charged or credited to Deposit Account No. 06-0130.

Respectfully submitted,



Kevin M. Farrell
Registration No. 35,505
Attorney for Applicant(s)
(207) 363-0558

York Harbor, ME

Dated: 11/6/01

JL\ARC\2010.FEE